

treatment due to a Congressional drafting error.

In addition, this bill would also reduce the administrative burdens this language places on states. Under administrative guidance, some Native American women can be enrolled on the program depending on a determination of their "access" to IHS services, which depends on certain documentation obtained by Native American women seeking breast and cervical cancer treatment from IHS. In order to determine the Medicaid eligibility of Native American women who are screened as having breast or cervical cancer through the Title XV program each year, states are having to put together a whole set of regulations and rules to make these special "access" determinations.

During this year, almost 50,000 women are expected to die from breast or cervical cancer in the United States despite the fact that early detection and treatment of these diseases could substantially decrease this mortality. While passage of last year's bill makes significant strides to address this problem, it fails to do so for certain Native American women and that must be changed as soon as possible.

In support of Native American women across this country that are being diagnosed through CDC screening activities as having breast or cervical cancer, this legislation will assure that they can also access much needed treatment through the Medicaid program while also reducing the unnecessary paperwork and administrative burdens on states.

I would like to thank all Senators for their support and specifically thank Chairman INOUE and Senator CAMPBELL of the Committee on Indian Affairs and Chairman BAUCUS and Senator GRASSLEY of the Finance Committee for agreeing to move the bill. In addition, I would like to thank the bill's cosponsors, which include Senators McCAIN, DASCHLE, BAUCUS, CLINTON, DOMENICI, FEINGOLD, KENNEDY, JOHNSON, MURRAY, STABENOW, WELLSTONE, HARKIN, MILLER, SNOWE, INOUE, SMITH of Oregon, CANTWELL, INHOFE, LANDRIEU, COCHRAN, BOXER, MURKOWSKI, MIKULSKI, and GRASSLEY for their help in getting the bill passed.

I would also like to thank Sara Rosenbaum at George Washington University for bringing this problem to our attention and for her vast knowledge on this issue and Andy Schneider for his technical advice and counsel on correcting the problem.

In addition, this bill would never have passed without the outstanding support and efforts by Fran Visco, Jennifer Katz, Wendy Arends, Alana Wexler, Joanne Huff, and Vicki Tosher at the National Breast Cancer Coalition, Wendy Selig, Licy Docanto, Brian Lee, and Janet Thomas of the American Cancer Society, Dawn McKinney

and Laura Hessburg of the American College of Obstetricians and Gynecologists, Leigh Ann McGee of the Cherokee Nation, Jacqueline Johnson of the National Congress of American Indians, and the many Indian health organizations that have helped with the passage of this legislation as well.

I urge the House to immediately take up and pass this legislation and for the President to sign it into law to ensure that Native American women are not inappropriately denied treatment for their breast and cervical cancer. As states proceed with the implementation of last year's bill, any further delay and failure to act could unnecessarily threaten the lives of Native American women across this country.

LOCAL LAW ENFORCEMENT ACT OF 2001

Mr. SMITH of Oregon. Mr. President, I rise today to speak about hate crimes legislation I introduced with Senator KENNEDY in March of this year. The Local Law Enforcement Act of 2001 would add new categories to current hate crimes legislation sending a signal that violence of any kind is unacceptable in our society.

I would like to describe a terrible crime that occurred October 16, 1994 in Salt Lake City, UT. Two women, one lesbian and one bisexual, allegedly were beaten by a man who yelled anti-gay slurs. The assailant, Gilberto Arrendondo, 44, was charged with four counts of violating the State hate crime law and four counts of assault.

I believe that Government's first duty is to defend its citizens, to defend them against the harms that come out of hate. The Local Law Enforcement Enhancement Act of 2001 is now a symbol that can become substance. I believe that by passing this legislation, we can change hearts and minds as well.

ART THERAPY

Mrs. CLINTON. Mr. President, since the terrible tragedies of September 11, many Americans, both adults and children, have been forced to deal with a level of pain and anxiety that most people have never had to endure before. Art therapy—the process of using art therapeutically to treat victims of trauma, illness, physical disability or other personal challenges—has historically been under recognized as a treatment. However, since September 11, many of us have witnessed its enormous benefits in helping both children and adults alike express their emotions in a very personal, touching way.

While nearly every person in our country has been irrevocably changed by that day's events, we know that children are particularly vulnerable to the long-term emotional consequences that often accompany exposure to

trauma. One of the ways in which children have coped with the aftermath of September 11 is by reaching for their crayons, pencils, and paintbrushes to express some of what they are feeling. Children all over the country have created images of World Trade Center towers and the Pentagon decorated with hearts, tears, rainbows, and angels. These simple, yet heartfelt, drawings, which do such a wonderful job of expressing the complex emotional terrain that these children are navigating, have moved us all.

Adults, too, have used creativity to help cope with the difficult emotions that so many are experiencing. I heard the story of a woman who was one of the last people to be rescued from the World Trade Center rubble after being trapped for more than a day. She drew a picture while in intensive care of herself under the rubble with angels and God hovering above her. Another victim of the disaster drew pictures of flowers and spoke about how grateful she was to be alive.

Last June, I had the pleasure of viewing an art exhibit here on Capitol Hill in which all of the art was created by patients who were being treated by art therapists. It was a remarkable feat for people coping with such immense personal pain to be able to produce such works of passion and beauty. Although sometimes the healing qualities of art may be less tangible or obvious than its aesthetic qualities, they may be even more important.

I want to thank art therapists, in New York and every community in America, who are assisting survivors, rescuers, and the bereaved. Throughout the country, there are almost 5,000 trained and credentialed art therapists working in hospitals, nursing homes, schools and shelters. They are among the army of mental health professionals who support those suffering from psychological trauma from the attacks, and undoubtedly will continue to serve the needs of individuals coping with subsequent stress disorders.

And that is why I rise today to encourage my colleagues in Congress to support the field of art therapy and expand awareness about this creative form of treatment. At this time of heightened awareness about the importance of maintaining mental health, we should recognize art therapy as a way to treat those among us who have experienced trauma.

RAILROAD RETIREMENT

Mr. CRAPO. Mr. President. I am pleased that we are proceeding on the Railroad Retirement and Survivors' Improvement Act. This important legislation will modernize the retirement system by giving rail employers and employees more responsibility and accountability for a private pension plan.